

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MC</i>		<i>2/8/00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>C.Y.C.</i>	<i>JC 530</i>	<i>9-15-00</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                        I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted                      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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